

Visa® Gold Application

Account Information				
Max Credit Limit Requested (r	nin \$500):		Credit Limit Increase Request	? □ Yes □ No
Joint Credit. □ If checked, Applicant agree that each of u			t Credit. By signing below, the Applie	cant and Co-
Applicant for Joint	Credit		Co-Applicant for Joint Credit	
Charity Cards				
account opening and then annually time by contacting Card Services at	thereafter 100% of (865)429-2273	the contribution is	310 per charity card issued on the account. given to the designated charity. You may ca	ncel this election at any
Smoky Mountains Card benefitting Friends of the Smokies: The Patriot Card benefitting Smoky Mtn Service Dogs: Applicant: Applicant: Co-Applicant: Applicant: Co-Applicant: Co-Appli				
Applicant Information				
			sages and/or emails from Tennessee State Bank r e and data rates may apply and data use may cou	
Name (First, Middle, Last):	<u> </u>			
Physical Address: Street	:			
City:	State:	Zip:	Length of Residence:	Months or Years (Circle one)
Monthly housing paymen	t: \$	0	wn, Rent, or Other: (Circle One)	
Mailing Address: □Check	if same as physic	al; otherwise: Str e	eet:	
City:	State:	Zip:		
Social Security Number of	or ITIN:		Date of Birth (MM/DD	/YYYY): / /
Email:	Phone	e #:	Alt Phone #:	
Employer:		Occupation	on:	
Length of Employment:	Months	s or Years (Circle One	Student?	Yes or No (Circle One)
In order to comply with federal law and account. Your income information is pa			we consider your ability to meet the payment obli	gation associated with this
'	eparate maintena		ed not be revealed if you do not wish	to have it considered as
Annual Gross Income*: \$		TSB Deposit A	Acct # (for income verification**):	
	ou agree to receive tel		sages and/or emails from Tennessee State Bank r e and data rates may apply and data use may cour	
Name (First, Middle, Last):				
Physical Address: Street	:			
City:	State:	Zip:	Length of Residence:	Months or Years (Circle One)
Monthly housing paymen	t: \$	0	wn, Rent, or Other: (Circle One)	<u> </u>
Mailing Address: □Check if same as physical; otherwise: Street:				
City:	State:	Zip:		
Social Security Number of	or ITIN:		Date of Birth (MM/DD	/YYYY): / /
Email:	Phone	e #:	Alt Phone #:	
Employer:		Occupation	on:	
Length of Employment	Months	s or Years (Circle One	Student?	Yes or No (Circle One)
In order to comply with federal law and	to determine factors su	uch as your credit limit	, we consider your ability to meet the payment obli	gation associated with this
account. Your income information is pa *Alimony, child support or s a basis for repaying this obl	eparate mainten		ed not be revealed if you do not wish	to have it considered as
Annual Gross Income*: \$		TSB Deposit A	Acct # (for income verification**):	

**Verification of income must be provided. If deposits from employer are not credited into the TSB account listed, please provide the last 90 days' worth of current pay stubs or bank statements with direct deposits (or most recent tax return if self-employed).

This service will provide overdraft coverage on the designated checking account. In the event the checking account becomes overdrawn, funds will be charged to the credit card in increments of \$50.00 and deposited into the checking account. This charge will be treated as a cash advance but will not incur the cash advance item fee. The charge will only occur if the available credit is sufficient on your credit card. There will be a \$10.00 overdraft item fee on the checking account for each debit or check that is covered by this overdraft service. In the event there are not sufficient funds on your credit card to cover the overdraft, the normal checking account overdraft item fee(s) or return item fee(s) will apply.					
Signatures					
application is true and complete.	I have read and agree to the	I am 18 years of age or older, and the information of terms and conditions of the account for which I am made on this application. I understand that you will re	applying. I authorize TSB to		
Applicant's Signature	Date	Co-Applicant's Signature	Date		

Overdraft Service- Please enroll me in this service for checking account #:

Tennessee State Bank Visa® Gold Credit Card Applicant's Copy- To be retained by Applicant

Interest Rates and Interest Charges	
Annual Percentage Rate (APR) Purchases	3.9% Introductory APR for six (6) billing cycles on new accounts After that, your APR will be 13.50% (standard APR). This APR will vary with the market based on the Prime Rate
Annual Percentage Rate (APR) Balance Transfers	3.9% APR for six (6) billing cycles from the date of transfer After that, your APR will be 13.50% (standard APR). This APR will vary with the market based on the Prime Rate
APR for Cash Advances	18.50% (Non-Variable)
How to Avoid Paying Interest on Purchases*	Your due date is at least 25 days after the close of each billing cycle. We will not charge you interest on your purchases if you pay your entire balance by the due date each month*.
Minimum Interest Charge	None
For Credit Card Tips from the Consumer Financial Protection Bureau	To learn more about factors to consider when applying for or using a credit card, visit the website of the Consumer Financial Protection Bureau at http://www.consumerfinance.gov/learnmore .

Fees	
Annual Fee	None
Transaction Fees	
Balance Transfer Fee	• None
Cash Advance	• Either \$5 or 4% of the amount of each cash advance, whichever is greater (maximum fee: \$50).
Foreign Transaction	1% of each transaction in U.S. dollars.
ATM Fee	• None
Penalty Fees	
Late Payment	• Up to \$29
Returned Payment	• Up to \$29

How We Will Calculate Your Balance: We use a method called "average daily balance (including new purchases)".

*Interest (Finance) charges on Cash Advances and Balance Transfers are assessed from the day you take the Cash Advance or Balance Transfer until the day we receive payment in full, there is no grace period. Transactions for overdraft services are Cash Advances.

Card Replacement Fee: \$5—We may charge this fee for any replacement card ordered by the cardholder.

<u>Documentation Copies</u>: \$3/copy—We may charge this fee for each copy provided.

Expedited Delivery Fee: \$40—We may charge this fee if you request expedited delivery of new or replacement cards.

Stop Payment Fee: \$33—We may charge this fee if you request a stop payment on an automated recurring charge to your credit card account.

ATM Fee: None if transaction is completed at one of the Bank's proprietary Automated Teller Machines (ATMs).

Overdraft Service: You may elect to enroll in an overdraft service with your credit card. This service will provide overdraft coverage on a designated checking account. In the event the checking account becomes overdrawn, a Cash Advance in an amount to cover the overdraft will be charged to the credit card in increments of \$50.00 and deposited into the checking account. This service is a Cash Advance and is subject to the Cash Advance APR, but will not incur the Cash Advance fee. The Cash Advance will only occur if the available credit is sufficient on your credit card. There will be a \$10.00 overdraft item fee on the checking account for each debit or check that is covered by this overdraft service. In the event there are not sufficient funds on your credit card to cover the overdraft, the normal checking account overdraft item fee(s) or return item fee(s) will apply.

Charity Cards: You may elect at application to carry a charity card to show your support of select non-profit organizations for an annual contribution of \$10.00 per charity card issued on the account. This contribution will be charged to your credit card account at account opening or when the election is made and annually thereafter. One hundred percent (100%) of contributions collected are given to the designated charity. You may cancel this election at any time by calling Card Services at (865) 429-2273. If cancelled, your card account will be transferred to a card with a new number and standard design.

Disclosure Effective 10.01.2023. Information about the costs and the rates is accurate as of October 2023. This information may have changed after that date. You may contact us to find out what may have changed by directing inquiries to Tennessee State Bank, Attention: Card Services, P.O. Box 1260, Pigeon Forge, TN 37868-1260; or call us toll-free at (877) 908-4TSB (4872).

USA Patriot Act

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT, UPDATING AN ACCOUNT OR PERFORMING TRANSACTIONS

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens or updates an account or performs transactions.

What this means to you: When you open or update an account or perform a transaction, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents and retain copies of those documents.

When opening or updating an account, we may also ask other information of you required by current regulatory guidance such as if you perform money services business activities; if you may be related to any foreign political official; and what levels of different types of transactions you expect to perform in your account.